



CITY OF CHELSEA, MA
Human Resources Department

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MONTHLY PREMIUM - FY22

Effective July 1, 2021 - June 30, 2022

Retiree (Non-Medicare) – HMO

Retiree Plan Description	Plan ID	Monthly Employee Contribution	Monthly City Contribution	Total Monthly Premium	Employee Percentage Share	Comments
City Che (Ret/HMO) 17.5% - Ind	01446 – 70001	\$162.25	\$764.90	\$927.15	17.50%	Retired prior to 05/01/2012 - over/under 65yrs (non-medicare).
City Che (Ret/HMO) 17.5% - Family	01446 – 70001	\$436.43	\$2,057.44	\$2,493.87	17.50%	
Sch Chel (Ret/HMO) 17.5% - Ind	01446 – 70006	\$162.25	\$764.90	\$927.15	17.50%	
Sch Chel (Ret/HMO) 17.5% - Family	01446 – 70006	\$436.43	\$2,057.44	\$2,493.87	17.50%	
City Chel (Ret/HMO) 20% - Ind	01446 – 70004	\$185.43	\$741.72	\$927.15	20%	Retired on or after 05/01/2012 - over/under 65yrs (non-medicare).
City Chel (Ret/HMO) 20% - Family	01446 – 70004	\$498.77	\$1,995.10	\$2,493.87	20%	
Sch Chel (Ret/HMO) 20% - Ind	01446 – 70003	\$185.43	\$741.72	\$927.15	20%	
Sch Chel (Ret/HMO) 20% - Family	01446 – 70003	\$498.77	\$1,995.10	\$2,493.87	20%	

Retiree (Non-Medicare) – PPO

Retiree Plan Description	Plan ID	Monthly Employee Contribution	Monthly City Contribution	Total Monthly Premium	Employee Percentage Share	Comments
City Chel (Ret/PPO) 25% - Ind	01446 – 80004	\$260.94	\$782.82	\$1,043.76	25%	Retired prior to 05/01/2012 - over/under 65yrs (non-medicare).
City Chel (Ret/PPO) 25% - Family	01446 – 80004	\$701.95	\$2,105.84	\$2,807.78	25%	
Sch Chel (Ret/PPO) 25% - Ind	01446 – 80005	\$260.94	\$782.82	\$1,043.76	25%	
Sch Chel (Ret/PPO) 25% - Family	01446 – 80005	\$701.95	\$2,105.84	\$2,807.78	25%	
City Chel (Ret/PPO) 30% - Ind	01446 – 80001	\$313.13	\$730.63	\$1,043.76	30%	Retired after 05/01/2012 - over/under 65yrs (non-medicare). Blue Cross
City Chel (Ret/PPO) 30% - Family	01446 – 80001	\$842.33	\$1,965.45	\$2,807.78	30%	
Sch Chel (Ret/PPO) 30% - Ind	01446 – 80003	\$313.13	\$730.63	\$1,043.76	30%	
Sch Chel (Ret/PPO) 30% - Family	01446 – 80003	\$842.33	\$1,965.45	\$2,807.78	30%	

Altus & DMS Dental

Dental Plan Description	Individual / Family	Monthly Employee Premium	Monthly City Contribution	Total Employee Monthly Premium	Employee Percentage Share	Comments
Altus - Individual	Individual	\$42.97	\$0.00	\$42.97	100%	
Altus - Family	Family	\$99.88	\$0.00	\$99.88	100%	
DMS - Individual	Individual	\$24.10	\$0.00	\$24.10	100%	
DMS - Employee plus 1	plus 1	\$45.40	\$0.00	\$45.40	100%	
DMS - Family	Family	\$65.60	\$0.00	\$65.60	100%	

Boston Mutual Life

Dental Plan Description	Plan	Monthly Employee Premium	Monthly City Contribution	Total Employee Monthly Premium	Employee Percentage Share	Comments
Boston Mutual - Individual Retiree	Basic	\$6.58	\$6.58	\$13.16	50%	Retiree
Boston Mutual - Dependent	Basic	\$1.24	\$0.00	\$1.24	100%	Dependent